

CMU

CENTRAL MICHIGAN
UNIVERSITY

Return to:

Off-Campus Programs

802 Industrial Drive

Mount Pleasant, Michigan 48859

[www.cel.cmich.edu/services/faculty/
opportunities/application.html](http://www.cel.cmich.edu/services/faculty/opportunities/application.html)

APPLICATION FOR PART-TIME TEMPORARY FACULTY

The application process requires complete information submitted in the following categories:

- 1) **Application:** Please complete this application with the requested information, sign, date the form and mail it to the address shown in the upper left hand corner.
- 2) **Curriculum Vita (CV, Resume):** Please submit your CV with as much detail of scholarly activity as possible, including previous teaching experience. The application process requires complete information submitted in the following areas: experience; research; publications – including dates; presentations – including dates, title of presentation and location; conference attendance – including dates, title of conference and location; membership and offices held in professional organizations. This information plays an important part in the approval process in determining if the applicant is active and current in the field of study we are attempting to obtain approval in.
- 3) **Transcripts:** Copies of transcripts indicating the posting of your degree are acceptable. The institution(s) will be contacted for verification of the degree(s). If the institution will not verify the degree from our request we will contact you to obtain official transcripts.
- 4) **Other, not required:** Other information may assist in the evaluation process but not required, which may include copies of syllabi for courses you have taught and end of course surveys that would demonstrate successful teaching experiences.

PLEASE TYPE OR PRINT IN DARK INK

1. Name _____
Last First Middle Maiden
2. U.S. Soc. Sec. No. _____ or Canadian Social Ins. No. _____
3. Home Address _____
Street City State Zip Code
4. Employer _____
5. Work Address _____
Street City State Zip Code
6. Present Position _____
7. May We Call at Work? Yes No
8. Evening Telephone _____
9. Day Telephone _____
10. Cell Phone _____
11. Fax Number _____
12. E-mail _____
13. How did you learn about us? _____
14. Have you ever been convicted of a crime? Yes No
15. Are there any felony charges pending against you? Yes No
16. Degrees:

<i>Degree</i>	<i>Degree Awarded</i>	<i>Discipline</i>	<i>Institution</i>

17. Teaching experience. Please list courses recently taught.

<i>Course Title</i>	<i>Under-grad Course</i>	<i>Grad Course</i>	<i>Most Recent Semester & Year Taught</i>	<i>Institution</i>

18. Please list at least 1-2 of your most recent publications, research/creative scholarly endeavors, providing publication data and descriptions of research in progress. The curriculum vita that you attach should provide complete information.

19. Using CMU course numbers please list specific courses in areas qualified to teach at the undergraduate and/or graduate level. Please view CMU’s Off-Campus Programs Bulletin, www.cel.cmich.edu/celbulletin/courses, for course number and descriptions.

Approval is requested to teach the following course:

(CMU may make additional requests based upon your education and experience.)

Dept. & No.	Course Title
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

20. If you are applying to teach graduate level courses identify the level of membership you are applying for:

Full Regular Associate membership on the graduate faculty

Please see www.grad.cmich.edu/GRAD_ED_POLICY.pdf to view the Graduate Education Policy to determining the membership you are applying for.

The applicant understands that he/she is responsible for conforming to the extramural activity policies of her/his own institution or agency or primary employment. By signing this form the applicant acknowledges the information is true and accurate. In connection with my application for part-time employment opportunities, I understand that my current and former employers may release any information contained in my personnel file or otherwise known by them to Central Michigan University.

I specifically release from liability any current or former employers, their agents, representatives, employees, officers, or directors for giving such information to Central Michigan University.

21. SIGNATURES: _____
Applicant (please sign) *Date*

For Office Use Only:

Official transcripts are attached ____ yes ____ no. If no, the highest degree (_____)
 was verified (by phone) by _____ on _____.
Name *Date*